

Webinar One

What we know about children & families impacted by incarceration



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National Resource Center
on Children and Families
of the Incarcerated
At Rutgers University
Camden NJ

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Talbot Mentors
Easton, MD
Impacted by parental incarceration as a child

1

Quick Logistics

Audio

- This is primarily a "Listen-Only" online event with 2 opportunities for questions and discussion. We will unmute your phones for the discussion and Q&A activities.
- If you have questions during the webinar, please send them via the participant chat box.
- There is one interactive poll near the beginning of the webinar. Please enter and submit your responses when prompted in the box that pops up.
- The Webinar recording and slides will be emailed to registered participants and posted online within a week after today's event. For assistance, please contact Chris Miele christopher.miele1@maryland.gov
- If you are having any audio problems or other technical issues, please let us know by emailing christopher.miele1@maryland.gov or by calling 410 350 5579.

Visual

- Log into the GOC google drive and the GOC website to view materials and slides. For assistance contact Chris Miele.

2

Presenters

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3


Planning this Webinar

We received an extraordinary 66% return on the 2019 Impact of Incarceration Topics of Interest survey. Thank you to all who responded.

The survey results identified interest in three content areas for the first of this two part series:

- Research on Incarceration Trauma and the use of ACES (Adverse Childhood Experiences) in working with children and families impacted by incarceration.
- Infusing resilience theory into programs and practices by balancing the trauma and ACES focus with strength based perspectives
- Specific strategies for responding to the varied needs of this complex group of families.

4



There are also guiding principles for responding to the needs of children and families impacted by incarceration that are incorporated into both webinars.

"Guiding Principles for Responding to the Needs of Children and Families of the Incarcerated" by Ann Adalist-Estrin in Contemporary Research and Analysis on the Children of Prisoners Cambridge Scholars Press: January 2018

5

Guiding Principles For Responding to the Needs of Children and Families of the Incarcerated

- # 1 Be Self Reflective
- # 2 Include experts with lived experience in defining the problem and designing the solutions
- # 3 Recognize themes and variations: Remember this is not one monolithic group
- # 4 First do no more harm. Use only accurate data about intergenerational incarceration
- # 5 Clarify the use and interpretation of research about this population
- # 6 Recognize the impact of trauma and toxic stress specifically for this population
- # 7 Recognize resilience and protective factors
- # 8 Honor significance of the incarcerated parent
- # 9 Advocate for purposeful programs and relevant supports
- # 10 Create an atmosphere of safety and trust: combat stigma
- # 11 Challenge media portrayals
- # 12 Collaborate


6

Be Self Reflective

"Knowing yourself is the beginning of all wisdom."

- Aristotle

Which feelings, opinions and life experiences color and shade your thoughts, feelings and opinions about every aspect of your work with children and families of the incarcerated?




7

What do you see?



8

Who do you identify with?



9

Perspective is 9/10 of reality



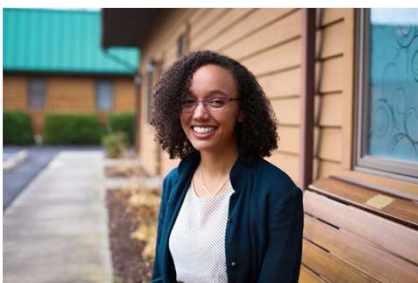
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Polling Activity
Assumptions Beliefs and Attitudes

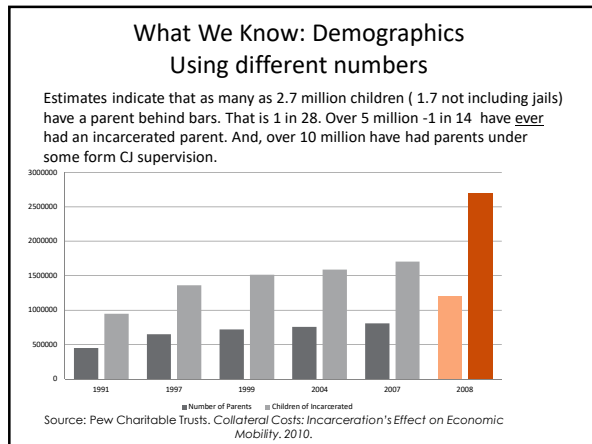
- The best thing that could happen to the children with incarcerated parents is _____
- The worst thing that could happen to children with incarcerated parents is _____

11

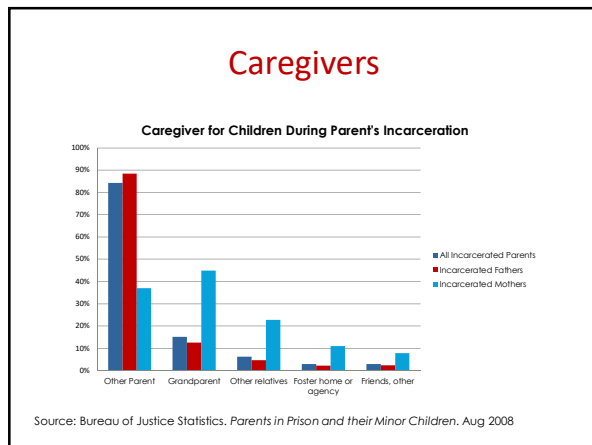
Perspectives on Assumptions



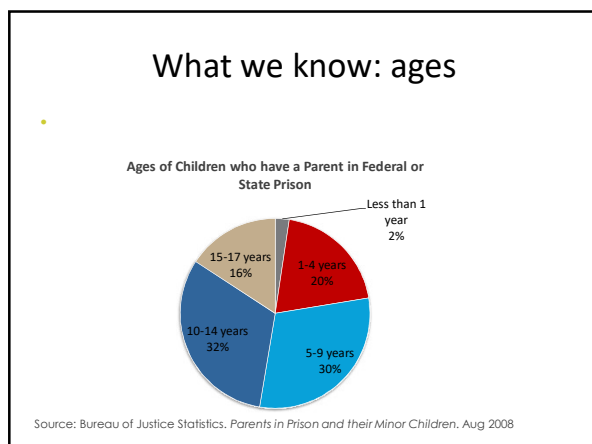
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13



14



15

Guesstimating

FORMULA:

Estimates are obtained by multiplying the number of male inmates by .547 and the number of female inmates by .653. This yields the estimated proportion of state inmates who are parents of minor children (see Mumola, 2000). The estimated number of children can then be calculated by multiplying the result for men by 2 (the average number of children per father in prison) and the result for women by 2.3 for women.



NOTE: WEBINAR 2 WILL INCLUDE A MORE IN DEPTH DISCUSSION OF DATA COLLECTION IN MARYLAND

16



What meaning do you make of this?

Compared with their white peers, African-American and Latino kids are over seven and two times more likely, respectively, to have a parent incarcerated. Annie E. Casey Foundation 2017

17

The Impact Combined Sources Point To Unique Toxic Stress of Parental Incarceration

- Stigma and Shame: In several variations
- Conspiracy of Silence → isolation
- Changes in residence, family structure
- Decrease in family income (20-50%)
- Difficulty maintaining a relationship with the incarcerated parent
- Fear and worry about parents and caregivers
- Loyalty Conflicts
- Guilt and self blame
- Trauma from the sudden absence of a parent or the events leading up to it
- Lack of relevant support
- School behavior and performance problems

18

Perspectives on Impact



19

Impact

Adverse Childhood Experiences

Growing up experiencing any of the following conditions in the household prior to age 18:

- Recurrent physical or emotional abuse or neglect
- Sexual abuse
- An alcohol and/or drug abuser in the household
- An incarcerated household member
- Someone who is chronically depressed, mentally ill, institutionalized, or suicidal
- Mother is treated violently
- Parental absence

The ACE Study is an ongoing collaboration between the Centers for Disease Control and Prevention and Kaiser Permanente, led by two principal investigators Robert F. Anda, MD, MS, and Vincent J. Felitti, MD.

20

Why ACES matter

Trauma: Impact on brain development related to Cortisol regulation

- Impulse Control-inability to stop oneself
- Cause and Effect- limited capacity to anticipate consequences
- Predictability-lack of social "cueing"
- Emotional Regulation - extreme difficulty delaying gratification
- Reciprocal Engagement-inability to tolerate conflict with or in others



These behaviors lead to poor school performance & increased drop out rates.

Attachment disruption trauma can lead to gang involvement & early pregnancies.

Self medicating in the wake of trauma and toxic stress leads to drug use, abuse and addiction.

21



Trauma in Children: Attachment Disruption as Trauma

- According to Victor Carrion at Stanford University young children have a distorted and non permanent sense of life and death and porous boundaries between themselves and parent.
- Therefore the absence or unavailability of a parent or primary attachment figure is emotionally equivalent to a life threatening event such as an adult being held at gunpoint. Carrion, V.G. "Early Trauma and Brain Development" presented to Zero to Three 25th National Training Institute. Phoenix, AZ. December 8, 2010.

22

Additional Trauma of Parental Incarceration

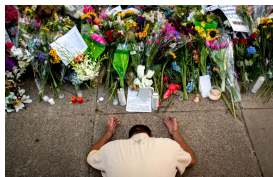
Witnessing the arrest of a parent intensifies the child's loss and creates additional trauma



* Phillips, S. D., & Zhao, J. The relationship between witnessing arrests and elevated symptoms of posttraumatic stress: Findings from a national study of children involved in the child welfare system. Children and Youth Services Review, 32, 1246-1254, 2010

23

Racism as Trauma



<http://www.npr.org/sections/codeswitch/2015/07/02/419462959/coping-while-black-a-season-of-traumatic-news-takes-a-psychological-toll>

24

Toxic Stress as Trauma

Persistent Fear and Anxiety Can Affect Young Children's Learning and Development and change brain architecture.

Scientists now know that chronic, unrelenting stress in early childhood, caused by abrupt separation from caregivers, extreme poverty, or parental depression, for example, can be toxic to the developing brain in the same way as repeated abuse and witnessing violence changes brain architecture.

Center on the Developing Child, Harvard University, *In Brief: The Science of Early Childhood Development*. NGA, Center for Best Practices, National Conference of State Legislatures, and Center on the Developing Child, Harvard University, 2008, www.developingchild.harvard.edu.

25

Toxic Stress and Incarceration: Economics

Economic Strain

- More than half of incarcerated parents provided the primary financial support for their families at the time of their arrest.
 - Families are more likely to receive public assistance when absent a parent.
 - The costs of transportation or phone calls to maintain contact with an incarcerated individual are frequently cited as additional financial burden.
 - One study found that family income levels during years of incarceration drop by more than 25% from the year before incarceration.⁴



⁴Johnson, Rucker. "Ever Increasing Levels of Parental Incarceration and the Consequences for Children." "Do Prisons Make us Safer? The Benefits and Costs of the Prison Boom." 2008.

26

Criminal Justice System Involvement: Is it Toxic?

Common Stress Points for Families

- Arrest : Fear, Confusion, Panic
- Pre trial/ Trial : Anxiety, Frustration
- Sentencing: Hopelessness, Helplessness
- Initial Incarceration : Abandonment, Stigma, Loyalty Conflict, Worry
- Incarceration Stage 2: Resentment, Balance, Idealization
- Pre-release: Fear , Anxiety, Anticipation
- Post-Release: Ambivalence, Chaos

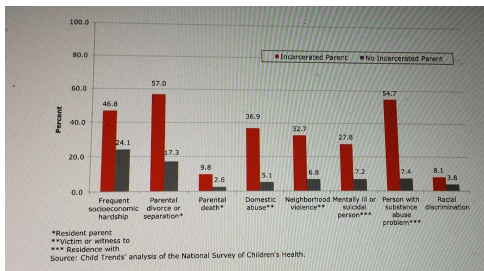
27

Alternative and Additional Aces: Secondary Effects of Parental Incarceration Trauma



28

Parental Incarceration Associated with Other Adverse Childhood Experiences

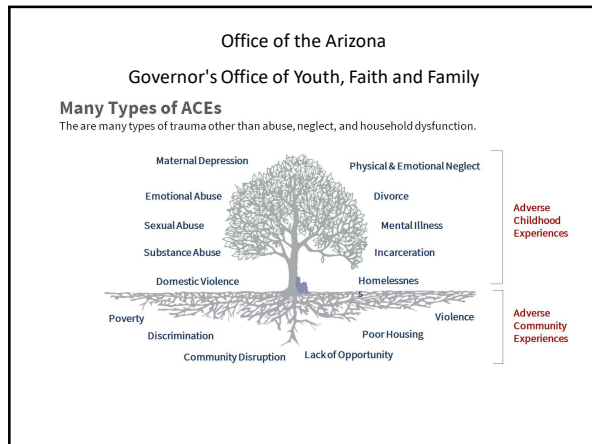


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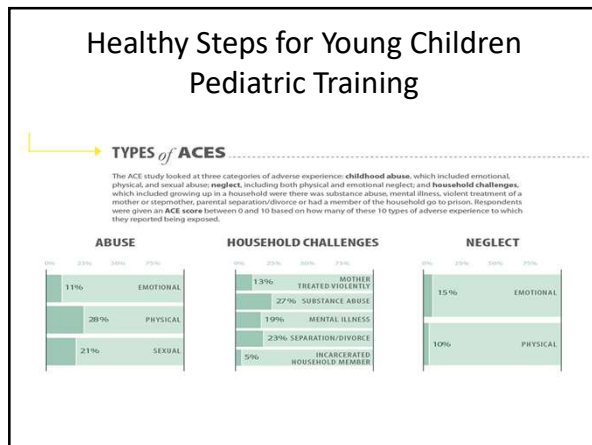
First Do No More Harm: Interpreting the Aces



30



31



32

Connected to ACEs but not explained Trauma & Health

Understanding the Impact on School Performance

Parental Incarceration

	Yes	No
Fair or poor overall health	4.95%	3.01%
Learning disability	15.29%	7.41%
ADD or ADHD	18.01%	7.09%
Depression	6.20%	1.83%
Anxiety	6.99%	3.06%
Behavioral or conduct problems	10.39%	2.62%
Autism (or related condition)	2.03%	1.80%
Developmental delay	6.35%	3.33%
Asthma	14.00%	8.43%
Obesity	21.15%	15.21%
Speech or other language problems	7.37%	4.58%
Diabetes	31%	31%
Epilepsy or seizure disorder	1.30%	.61%
Hearing problems	1.93%	1.19%
Vision problems	2.11%	1.26%
Bone, joint, or muscle problems	3.10%	2.16%
Brain injury or concussion	.42%	.26%
Activity limitation	8.44%	4.69%
Chronic school absence	3.96%	2.60%

Stress Proliferation across Generations? Examining the Relationship between Parental Incarceration and Childhood Health
Kristin Turney 2014

33

Interpreting the research: Always ask why might this be true?

- Children who have a parent in prison may be more than twice as likely as other kids to have depression, attention problems and conduct disorders by the time they reach adolescence, a U.S. study suggests.
- They're also more likely to drop out of high school. And more likely to wind up in jail, use illegal drugs, suffer from anxiety and experience social isolation when they're adults.

Association of Childhood History of Parental Incarceration and Juvenile Justice Involvement With Mental Health in Early Adulthood
 Nia Heard-Garris, MD, MSc; Kaitlyn Ann Sacotte, MD; Tyler N. A. Winkelman, MD, MSc; Alyssa Cohen, MD; Patricia O. Ekwueme, BA; Elizabeth Barnert, MD, MPH, MS; Mercedes Carnethon, PhD; Matthew M. Davis, MD, MAPP
 JAMA Network Open. 2019;2(9):e1910465.

34

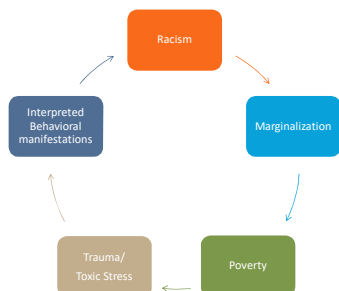
Be Self reflective: Challenging Myths

Children of incarcerated parents are 70% (7 out of 10) or 5 to 6 times more likely than the average child to go to prison or jail.

- Newest data(based on 1990's studies) show 2.8 times more likely to be incarcerated themselves than those peers without incarcerated parents.
- Flaws in the data:
 - Pre mass incarceration population
 - Appalachian population
 - Not connected to ACES
 - Diagnostic Dilemma's
- Repeating this myth compounds the shame and stigma children of incarcerated parents feel

35

If Preventing Intergenerational Incarceration is a Goal: Why must come before how:

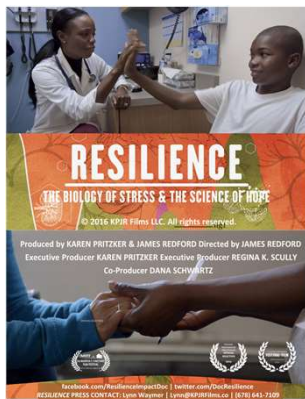


36

Perspectives on Trauma



37



38

Resilience

BUT

No one who has experienced significant adversity is irreparably damaged.



39

Resilience

"Risk factors are not predictive factors because of protective factors."

David Satcher, M.D.
Former U.S. Surgeon General



40

Recognizing Protective Factors: Combined Sources on Resilience

- Primary attachments
- Other adult bonds
- Skills-confidence
- Emotional competence
- Faith, hope, ability to find meaning
- Participation, Influence



41

The Rest of the Research



The presence of parents or other adult attachment figures raises dopamine levels and lowers the dangerous levels of cortisol.

(Dozier, 2005)

42

Interpreting the Research

The ACE Study through a lens of child maltreatment vs. adult risk factors

"So when we talk about a child losing a parent to incarceration and we are interpreting the ACES literature only through a child maltreatment lens, the meaning that gets made (intentionally or not) is that children of incarcerated parents are maltreated children, harmed by their parents and thus better off without them. If however, the parents who are in prison or jail are seen as potential supports for these children, as buffers from the toxicity of the stress, then a different meaning is made of the loss. It becomes more profound and less dismissible."

Adalist-Estrin, A. White House Remarks 2014

43

Perspectives on Resilience



44

Discussion: How are your initiatives protective factors?

- ☐ Primary Attachments
 - Supporting parent /child relationships with IP
 - Supporting caregivers
- ☐ Other adult bonds
 - Training for teachers/counselors
 - Mentoring
- ☐ Skills-confidence/Faith/Meaning
 - After school programs
 - Support groups
 - Parenting Classes
- ☐ Empowerment
 - Looking to the children and families to define the problems and design solutions
- ☐ Other ?



45

Promoting Protective Factors:

- Participation and Influence of personally impacted from the beginning
- Community Supports and Collaborations
- Training for systems in the unique needs of this population
- Relevant skill building

NOTE: WEBINAR 2 WILL INCLUDE A MORE IN DEPTH DISCUSSION OF INCLUDING FAMILIES AS ADVISORS, COMMUNITY COLLABORATIONS, AND RELEVANCE IN PROGRAM MODELS

46

Promoting Protective Factors

The most vital step in creating a strong culture of resilience is to involve the members of the communities we serve. These are the individuals who will identify the strengths of the residents that can be harnessed to help individuals impacted by adverse experiences. Fostering opportunities for group discussions on the most significant stressors harming community members, whether they be violence, racism, or substance abuse, will help individuals become more resilient and will also empower residents to make our communities healthier.

From: Defang ACEs: End Toxic Stress by Developing Resilience Through Physician-Community Partnerships. Amanda Jichlinski, MD. 2017

47

Summary:

Promoting Protective Factors

Attitude

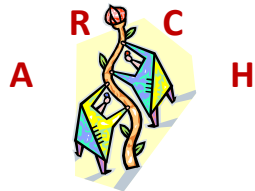
Relevance

Complexity

Healing

Webinar 2: Strategies for Success

November 14



48

Final Perspectives



49

Questions?



50

End Quotes: Einstein



51
